

# CLIAAC Mtg-22 Aug 2013

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6:47 AM

Written summary of comments from **Alexis Carter, MD**

Thank you for the invitation to present at this meeting. I am a practicing pathologist at Emory University, and I am board-certified in anatomic pathology, clinical pathology and molecular genetic pathology. I am also the Director of Pathology Informatics at Emory and am one of the people on the ground implementing the requirements under Meaningful Use. I deal with the interactions between our laboratory information system and our Electronic Health Record (EHR) on a daily basis. About a year ago, I was asked to join the Laboratory Reporting Tiger Team for the Office of the National Coordinator (ONC) for Health Information Technology by Megan Sawchuk and Robert Dieterle. When I was told about the work that this team would be doing, I found that I could not refuse such an offer despite an already busy schedule.

I am a biased proponent of standards. I am the chair of an international working group for laboratories for the organization that owns SNOMED-CT. In addition, I am one of the authors of the digital pathology validation guidelines produced by the College of American Pathologists that CLIAAC heard about yesterday.

The invitation to join this Tiger Team is living proof of the ONC's efforts to accommodate recommendation #1 from CLIAAC, namely the inclusion of laboratory experts in the development of Meaningful Use requirements and EHR certifications. This recommendation from CLIAAC acknowledges that laboratory experts know better than most the potential for mismanaged laboratory data to cause real and significant patient harm, so I thank the committee for making this recommendation. It is my belief that through the use of appropriate standards, we can help prevent medical error and ensure patient safety.

Participation on the Tiger Team has been a time commitment, but it has been worth it. I have learned a lot. My knowledge of HL7 was very basic prior to joining this group (which is a testament to the fact that a participant doesn't have to be an expert in HL7 to contribute). However, I have learned a lot, not only about HL7, but also about how to make standards that can be used by a variety of practices including large commercial laboratories, academic medical centers and private practices. I have also been grateful for the participation of other pathologists in the group (Drs. Walter Henricks, Victor Brodsky, Mark Tuthill and Nancy Cornish) since it is important to ensure that my own needs for my own laboratory are not unique.

Our group has been focused on the interaction between laboratory information systems and EHRs, but I would like to take this opportunity to mention that it is my hope that this committee (CLIAAC) will also consider the need for laboratory experts to be involved in the display of laboratory data in patient portals as required under Meaningful Use. It is my belief that patients should have access to all their laboratory data, although there is discussion about the most appropriate time to release that data to a patient portal. There is concern about the potential for psychological harm when patients read laboratory results which they don't fully understand or for which they don't have appropriate context based off of reports from individual patients. Sadly, I have firsthand experience in trying to explain

laboratory results to patients because our reports are written for physicians and don't have the appropriate additional explanations necessary to help patients understand them.

In response to a question from Mr. Augustine (member of the CLIAC committee) regarding what I think patients should be able to see in their patient portal:

- All of their laboratory data (at the appropriate time)
- Appropriate abnormal flags
- Longitudinal display so that patients can easily track their values over time (rather than having to scroll down through a list)

One of my colleagues at Emory (Dr. Corinne Fantz) and I are very interested in work on patient portals and the best way to display laboratory data directly to patients.